



Unclaimed Property Quick Claim Form

Quick Claim streamlines and speeds up the claim process for unclaimed properties under \$500.

You can use Quick Claim if:

- The property you are claiming is less than \$500.
- You are the original property owner, and not the heir or representative of the original owner.
- The Attorney General's office has sufficient owner information for the property you are claiming.

If you have discovered that you have unclaimed property waiting for you, you are now an owner and a claimant. You may prepare your claim by providing the following information and by having the form signed and notarized. However, please be aware that you may still need to complete the standard claim form at the discretion of the unclaimed property division. Please make sure to include your property ID number found on the Web site or in the newspaper listing.

Name as it Appears on Published List or Database*	Owner's Social Security Number or Federal ID Number
Claimant Name (if different)	Date of Birth
Current Address (Number and Street or RR#)	Property Identification Number. (This number is the number that is listed with the unclaimed property in the database or newspaper listing.)
City, State and ZIP Code	Daytime Telephone Number

Incomplete forms cannot be processed.

Former Addresses. List the former addresses in Indiana used by the property owner.

Street Address	City, State and ZIP Code

Claimant Certification

Under penalties of perjury, I certify that the information provided on this claim form is true to the best of my knowledge. Upon payment of this claim, said claimant will indemnify and hold harmless the State of Indiana, officers and employees from any damages, claims or losses of any kind resulting in payment of the property being claimed. I understand that if additional claimants should come forward to claim these funds, they may be provided with my name and address as payee to the funds.

Subscribed And Sworn To Before Me This ____ Day Of _____, 20 ____ _____ <i>Notary Public County, State</i> My Commission Expires _____	Signature Of Claimant _____ _____ <i>Printed Name</i> _____ <i>Title</i>
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Mail completed Quick Claim form to: Unclaimed Property Division, Office of the Indiana Attorney General, P.O. Box 2504, Greenwood, IN 46142.

Visit Our Web Site at www.IndianaUnclaimed.com